

**Robert Bentley** 

GOVERNOR

## STATE OF ALABAMA BOARD OF HEATING, AIR CONDITIONING AND REFRIGERATION CONTRACTORS

PO Box 305025 Montgomery, Alabama 36130-5025 (334) 241-0840



Kathy S. LeCroix EXECUTIVE DIRECTOR

Fax: (334) 265-0570 www.hacr.alabama.gov

## HVAC CHANGE OF STATUS APPLICATION ACTIVE to INACTIVE

Name		_ SSN	Certification #		
Address					
City	County	State	Zip Code		
Previous Business Name					
Home Phone	Cell Phone	Alt	Alternate Phone		
CITIZENSHIP <i>This s</i> § 31-13-7.	ection to be completed in co	ompliance with Ala. Co	de § 34-14A-7 and Ala. Code		
	mpleted by the individual re d liability company, or partr		f the responsible in charge is le in charge.		
1. Are you a citized Yes section 2.	No If "yes," pl	lease read the declaration e question 2 below.	n below, sign, and continue to		
PROVIDE PROOF B	Y SUBMITTING ONE OF	THE ITEMS LISTE	O ON ATTACHMENT		
I sign this declaration representation in this de	eclaration is perjury in the s all information submitted is	making a false, fictitio econd degree pursuant	ous, or fraudulent statement or to Ala. Code § 13A-10-102. orrect in accordance with the		
<u> </u>	11 : 6	Date			
Signature of Re	esponsible in Charge				

	If you are not a cf America?	citizen of the	United States, are y	ou an alien who i	s lawfully preser	nt in the United
section 2	Yes	No	If "yes," please	read the declaration	on below, sign, a	nd continue to
I sign th	is declaration un	nder penalties	awfully present in to s of perjury; making perjury in the second	a false, fictitious	s, or fraudulent s	
				Date		
	Signature of Res	ponsible in c	harge		_	
(If this for	contractor shall	ng used		purchase local id to perform in	submit fe	
All INACITVE c	ontractors are	required to	o maintain four (4 to renew their l		tinuing educati	ion each year in order
(Exception: Any IN	ACTIVE contracto	or who is 65 y	rears old or older may waived.)	request to have the	mandatory 4 hour	rs of continuing education
Signature (Re	 equired)			I	Date:	
Date Received:						